DATE	: 12/8/05	Paper No.:
TO SPE OF	: ART UNIT 2// 6	
SUBJECT	: Request for Certificate of Cor	rection on Patent No.: <u>6978565</u>
A response is	s requested with respect to the	e accompanying request for a certificate of correction.
Please com	plete this form and return w	ith file, within 7 days to:
Palm location	on 7580, Certificates of Co	rrection Branch – South Tower – 9A22
If response MADRAS.	BJECT: Request for Certificate of Correction on Patent No.:	
patent read a	s shown in the certificate of co	prrection (COCIN)? No new matter should be introduced, ne
Silouid tile 300	pe of meaning of the claims be of	•
		<u> </u>
Thank You Fo	r Your Assistance	Certificates of Correction Branch
		Tel. No. 703- 308-9390 ext. 114
	t for issuing the above-ide	Tel. No. 703-308-9390 ext. 114
Note your decision	•	
Note your decision	on the appropriate box.	entified correction(s) is hereby:
Note your decision	on the appropriate box. Approved	entified correction(s) is hereby: All changes apply
Note your decision	Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.
Note your decision	Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.
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Note your decision	Approved Approved in Part Denied	entified correction(s) is hereby: All changes apply. Specify below which changes do not apply.

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